1420 Howe Avenue, Suite 6 ■ Sacramento, CA 95825 ■ <u>www.vmb.ca.gov</u> 916-263-2610 ■ 916-263-2621 (Fax)



# California State Board License Application Instructions

Included in this packet is information on how to become licensed in California. It is the candidate's responsibility to meet the required deadlines.

The following outlines the examination and licensure process:

#### **California State Board Examination**

To apply for the California State Board examination, the applicant must submit the application, appropriate fees and the required documentation that is identified on page 2 of these instructions, by the deadline. Once all the documentation is received, the application is reviewed to determine eligibility. Status and approval letters are sent approximately 30 days after the filing deadline for each examination. If the application is incomplete, the candidate is given an opportunity to submit the missing documentation.

Once the application is complete the candidate will be mailed the examination notice and supporting documentation for the California State Board examination. This information is typically sent approximately 4 weeks prior to the examination.

In order to become licensed in California, the following examinations must be completed within 60 months of each other:

- North American Veterinary Licensing Examination (NAVLE)
- California State Board Examination (CSB)
- Veterinary Law Examination (VLE)\*

The 60 month deadline starts once a candidate passes any one of the examinations.

\*Graduates of the University of California at Davis and Western University of Health Sciences complete a course on California veterinary law as a part of their curriculum and are exempt from the VLE requirement.

#### **Fingerprint Clearances**

Fingerprint clearances are required for permanent licensure via Livescan fingerprinting which can only be done in California. Please refer to the "Fingerprinting Requirements" information in this package or on the Board's website at <a href="www.vmb.ca.gov">www.vmb.ca.gov</a> (Examination Page). Clearances from both the California Department of Justice and Federal Bureau of Investigation are required prior to permanent licensure. (See <a href="SECTION C">SECTION C</a>)

#### **Filing Deadline**

The application and fees must be postmarked by the filing deadline identified on the "Application/Examination Schedule, Fees, and Deadlines" form. Applications received after this date will be returned. Application forms and fees must be submitted to the VMB office, 1420 Howe Avenue, Suite 6, Sacramento, CA 95825-3228.

## CALIFORNIA LICENSURE APPLICATION REQUIREMENTS

To apply for the California State Board (CSB) examination, submit the following documentation:

- Completed application form
- Fees of

\$65.00 application fee \$140.00 CSB examination fee \$35.00 VLE fee (if applicable)

- Affidavit form, if applicable (See <u>SECTION A)</u>
- Candidates must provide license verifications for each state or Canadian providence in which they are
  or have been licensed, even if the license is not current. Original letters must be issued from each
  state's board office or obtained through Veterinary Information Verifying Agency (Refer to VIVA
  Information SECTION B). This information can take up to eight weeks to process by the state of
  licensure.
- NAVLE scores: All candidates must have NAVLE scores on file for licensure. NAVLE scores are required for NON-AVMA Accredited School Candidates for application approval.
- Veterinary School Information

#### **AVMA Accredited School Candidates:**

- Photo copy of diploma; or
- Official transcript showing degree conferred; or
- Letter from Dean, with school seal, attesting to senior status including expected date of graduation within six months of examination (copy of diploma will be required prior to licensure)

#### NON-AVMA Accredited School Candidates:

- Official certified college diploma and transcripts; or
- Notarized copies of diploma and transcripts (original certified translation by a *licensed translator* is required if not issued in English)

#### AND

A copy of the ECFVG or PAVE certificate
 (Program completion letter or certificate must be received 45 days prior to CSB examination)

#### AND

- Proof of passing the North American Veterinary Licensing Examination (NAVLE), scores must be transferred by VIVA. (See SECTION B)

#### **INSTRUCTIONS for COMPLETING APPLICATION**

Please complete the application by following the instruction numbers, which correspond to numbered sections on the "Veterinary Application" form.

#### 1. Application and Fees

Candidates must mark the appropriate box(es) indicating selection(s) for which they are applying. In addition, candidates must remit the required fees at time of application. Fees may be combined in one check or money order payable to the Veterinary Medical Board (VMB).

#### 2. Social Security Number

Disclosure of a social security number is mandatory and must be provided prior to "licensure." This number must be a **United States** social security number. Social security numbers from other countries will *not* be accepted.

#### 3. Name/Birthdate/Address

Candidates must include their full legal name and provide their date of birth, which is used for identification and to determine license renewal dates.

Candidates must indicate their current mailing address. This address is used for all correspondence relating to the examination. Address change requests **must** be made in **writing** and refer to "exam candidate address change."

Candidates must indicate a permanent residence address. This address is used for correspondence if mail is returned from the current mailing address on the application.

#### 4. Veterinary College or University

Candidates must indicate the college or university from which they received their veterinary degree, the course or major taken, date of graduation, and degree received.

#### 5. Physical Description

Candidates must provide their physical description including their color of hair and eyes, weight, and height. Candidates must sign in the designated area certifying the information provided is true and correct. *Failure to sign will delay application approval.* Candidates must attach a current photo to the application.

Photo may be either black-and-white or color. The image must be clear and readily discernable. Photos must be frontal face shots (profile or full-body images **are not acceptable**). (Images must be clear enough for use on a driver's license or passport.) Photos must be cut to fit the application photo box

#### 6. Licensure in Other States/Provinces

Candidates must list each state in which they are licensed or have been licensed, whether or not the license is current.

#### 7. Disclosure of Disciplinary Action

Candidates must disclose whether or not there has been any disciplinary action taken against their license to practice veterinary medicine (revoked, suspended, restricted or denied in any state, territory or province, placed on probation, or entered into a voluntary surrender). A separate letter explaining the action is required.

#### 8. Conviction of Misdemeanor or Felony

Candidates must disclose any offense other than minor traffic violations or pled nolo contendere to any violation of any law of any state, the United States, or a foreign country

A separate letter explaining the details of the offense is required in addition to <u>certified</u> copies of arrest <u>and</u> court documents. These documents will be reviewed by the Board prior to establishing eligibility for licensure.

#### 9. Previous Application(s) for Licensure in California

Candidates must list approximate dates of previous application(s) of any veterinary examination or licensure in California.

#### 10. Reciprocity Applicants - ONLY

#### 11. Certification Signature

A signature certifying under penalty of perjury under the laws of the State of California that the information provided in the application is true and correct is required for application processing. Failure to include certification signature will delay application approval.

#### ADDITIONAL INFORMATION

#### A. Affidavit

The affidavit form is required for all candidates who have previously applied for an examination, verifying that the candidate has not practiced veterinary medicine in California since his/her last application.

#### B. VIVA Score Transfers / License Verifications

Candidates who registered and passed the NBE, CCT or NAVLE outside of California must have passing scores transferred by the Veterinary Information Verifying Agency (VIVA). California will not accept evidence of NBE, CCT, or NAVLE scores from any other source. Candidates should request the "VIVA Application" or license "Credentials Verification" forms from VIVA, 4106 Central, Kansas City, MO 64111, or by calling (877) 698-VIVA, or online at http://www.aavsb.org.

#### C. Request For Live Scan (Form BCII 8016)

All candidates for permanent licensure must be fingerprinted by LIVE SCAN, which can only be completed at a California Live Scan location. Although Live Scan is not required for approval to take an examination, the results of your Live Scan must be received by the Veterinary Medical Board prior to approval for regular licensure. Refer to the enclosed "Fingerprinting Requirements" form. For LIVE SCAN service locations and fee information please visit: http://caag.state.ca.us/app/livescan.htm.

#### D. Application & Examination Fees

The application fee for the cost of reviewing an application will not be refunded. An examination fee will only be refunded when a candidate is not eligible for examination. According to California Code of Regulations Section 2011(a), "An applicant shall **not be refunded** any fee for failure to appear for an examination at its designated time and place."

A candidate who is not able to appear for an examination may reschedule to a later examination by immediately notifying the Board of their intent in writing. The written request to reschedule must be postmarked by March 15, for the April examination and November 15 for the December examination.

#### E. Special Accommodations

The Veterinary Medical Board provides reasonable accommodations for physically and/or mentally challenged candidates. Candidates must notify the VMB of their needs by completing a "Request for Special Accommodations of Disabilities" form, which is included as a part of the veterinary application package. The "Request for Special Accommodation of Disabilities" form, all supporting disability documentation from a licensed professional, and application must be submitted by the examination filing deadline.

#### F. Non AVMA Graduate Education Equivalency Program Information:

Educational Curriculum for Foreign Veterinary Graduates (ECFVG) American Veterinary Medical Association

www.avma.org

1-800-248-2862

Program for the Assessment of Veterinary Education Equivalence (PAVE) American Association of Veterinary State Boards

www.aavsb.org

1-877-698-8482

Veterinary Medical Board

1420 Howe Avenue, Suite 6 ■ Sacramento, CA 95825 ■ www.vmb.ca.gov

916-263-2610 ■ 916-263-2621 (Fax)



## **VETERINARY APPLICATION**

1. O	APPLICATION TYPE/FEES (please check what you APPLICATION FEE - \$65.00				<b>ying for and</b> Use Only	item	s that p	ertain to you	r application)
Application fee is required for all application types.			ypes.						
0	CALIFORNIA STATE BOARD EX	XAM		Rec	eipt Numb	er:			
	\$140.00 – California State Board	Examina	ation Fee						
	\$35.00 – Veterinary Law Examin	ation Fee	(if applicable)	Date Cashiered:					
0	RECIPROCITY TEMPORARY LI	CENSE		Da	te Casnier	ea:			
	\$35.00 – Veterinary Law Examin	ation Fee	Э						
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	Application Fee Only			ATS ID:					
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TO	TAL FEES SUBMITTED \$								
2.	UNITED STATES SOCIAL SEC	URITY N	IUMBER						
States social security number. Social security numbers from other countries will <i>not</i> be accepted. Section 30 of the Busin and Profession Code and Public Law 94-455[42 USCA section 405(c)(2)(C)] authorize collection of the Social Security num Your Social Security number will be used exclusively for tax enforcement purposes, for purposes of compliance with judgment or order for family support in accordance with Section 17520 of the Family Code, or for verification of licensur examination status by a licensing or examination entity which uses a national examination and where licensure is recipr with the requesting state.  U.S. Social Security Number:  Email Address:					mpliance with any ion of licensure or				
3.	FULL NAME/ADDRESS								
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CURRENT MAILING ADDRESS CITY		,		STATE	ZIF	)		COUNTRY	
PERMANENT MAILING ADDRESS CITY		,		STATE	ZIF	ZIP		COUNTRY	
4	4 VETERINARY COLLEGE OR UNIVERSITY								
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PHOTO MUST BE THE SAME SIZE AS THIS BOX: 2" x 2 1/8									

6. PLEASE	LIST THE STATES/P	<b>PROVINCES WHERE</b>	YOU HAVE EVER HELD A LICEN	ISE	
STATE/PROVINCE	LICENSE #	DATE ISSUED	ISSUED BY EXAM OR CREDENTIALS	PERIOD OF I	PRACTICE
	_				
DISCLOS	URE OF DISCIPLINA	ARY ACTION			
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VOCATION, SUSPENSION	ON, PROBATION, VOLUNTARY	SURRENDER, OR ANY OTHE	R PROCEEDING?	If Ves please	provide detailed
					ation, include the
					where the discipline
				occi	urred.
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	AW OF ANY STATE, THE UNIT				
				If Yes, explain fu	ılly as described ir
				the application	on instructions.
illowing a plea of nolo cont		leas or verdicts of guildy. YOU N	providing false information must be reported. The defin		ues convictions
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	D FOR AN EXAMINATION OR LI E(S) AND OR LICENSE NUMBE		-		
D. RECIPRO	CITY APPLICANTS	ONLY		VEC	NO
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31 FIVE IMMEDIATELY	PRECEDING FILING THIS APP	LICATION FOR LICENSURE IN	CALIFORNIA?		
. CERTIFIC	ATION SIGNATURE	AND DATE			
			California Veterinary Medical Board the date that a California veterinary		
			oard any disciplinary action and/or v		
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	linary action against r		Ç		
partify under par	halty of periury under	the laws of the State	of California, that all information pro	wided in conno	oction with
			nd complete. Providing false inform		
	inds for denial of licer			addit of officell	y roquirou
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Signature of applic	anı		Date		

NOTE: All items in this application are mandatory; none are voluntary. Failure to provide any of the requested information will result in the application being rejected as incomplete. The information provided will be used to determine qualification for licensure, per Section 4846 of the Business and Professions Code which authorizes the collection of this information. Information regarding the issuance or denial of a license by the Board may be transmitted to any other veterinary medical licensing authority. Candidates have the right to review their application subject to the provisions of the Information Practice Act. The Executive Officer is custodian of records. INFORMATION COLLECTION, ACCESS, & DISCLOSURE: Information you provide on this application is maintained by the Executive Officer of the Veterinary Medical Board, 1420 Howe Avenue, Suite 6, Sacramento, CA 95825, (916) 263-2610. The information is requested pursuant to Business and Professions Code sections 4800-4917 and/or Title 16, California Code of Regulations, Division 2, Chapter 11.

## **AFFIDAVIT**

Title 16, Chapter 20, Article 2, Section 2015 (b) of the California Administrative Code relating to the administration of the California Veterinary Practice Act, states:

"(b) Upon application for re-examination, proof of the applicant's qualifications need not be resubmitted, but the applicant shall file an affidavit on a form prescribed and provided by the Board verifying that he or she has not practiced veterinary medicine in California since the date of his or her last application."

Based on the above requirement, please complete the following information:

		3					
1.		oximate date of last cation (month & year):					
2.	•	have worked in a California veterinary practice, then please list the name and address of your oyer or supervisor:					
Name Supe	e of rvisor:						
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Date: Empl							
3.	If you h	have not worked in a California veterinary practice, check here					
4.		y certify, under the penalty of perjury, that I have not practiced veter ne date of my last application.	inary medicine in California				
Print	Candidat	e's Name:					
Cand	lidate's S	gnature:					
		Date:					

## APPLICATION/EXAMINATION SCHEDULE FEES AND DEADLINES

APPLICATION TYPE	EXAM DATES	FILING DEADLINE	
O APPLICATION FEE	Application fee is required for ALL application types.		
\$65.00			
O CALIFORNIA STATE BOARD EXAM \$140.00 – California State Board Examination Fee \$35.00 – Veterinary Law Examination Fee	December 18, 2006 April 16, 2007	September 15, 2006 January 15, 2007	
O RECIPROCITY TEMPORARY LICENSE \$35.00 – Veterinary Law Examination Fee	CONTINUOUS FILING		
O INTERN/RESIDENT TEMPORARY LICENSE Application Fee Only	CONTINUOUS FILING		
Checks should be made payable to the Veterinary Medical Board (VMB).			

To confirm that your application was received by the Veterinary Medical Board (Board), please send a self-addressed, stamped envelope or use a mail source where signature verification of receipt is required. **This does not confirm approval of your application, only receipt!** Due to the volume of applications received, the Board is unable to give verbal confirmations over the phone.

A letter regarding the status of your application is sent approximately 30 days after the filing deadline for each examination.

## VETERINARY MEDICAL BOARD Test Plan - California State Board Examination

Examination Content Outline	Percentage of Approximate Test Items	
HISTORY - Determine chief or presenting complaint, patient's prior health status, and historical factors pertinent to patient's current condition.	13%	
PHYSICAL EXAMINATION - Gather patient data by inspection, palpation, auscultation, and observation to evaluate current health status.	16%	
ASSESSMENT - Establish problem list, determine differential diagnoses and priorities for management, diagnosis and treatment, and identify animal and public health risks.	10%	
DIAGNOSTIC PLAN - Identify risks, benefits, and limitations associated with diagnostic procedures for various organ systems.	9%	
DIAGNOSIS - Establish diagnosis and prognosis from clinical, laboratory, and other diagnostic findings.	10%	
TREATMENT PLAN - Formulate problem-based treatment plan.	9%	
TREATMENT INTERVENTIONS - Administer medical and other nonsurgical treatments; perform surgical and dental procedures.	18%	
PREVENTIVE CARE - Develop programs to prevent, control, or manage parasitic, nutritional, disease, medical, dental, and reproductive conditions.	9%	
PROFESSIONAL RESPONSIBILITIES - Fulfill legal requirements and determine professional responsibilities related to practice in California.	6%	
TOTAL *Percentages figured on 100 scored items.	100%*	

#### CALIFORNIA STATE BOARD EXAMINATION INFORMATION

The content of the California State Board emphasizes regionally specific questions. The examination consists of 140 items (100 scored + 40 pretest items) and you will have approximately 3 hours to complete the test. The test plan and content includes, but is not limited to questions regarding:

- 1. Working with clients, employers, and consultants, complying with government requirements and helping clients or employers comply with them:
  - a. Department of Health Services (rabies, psittacosis)
  - b. Radiation Safety regulations
  - c. Department of Food and Agriculture regulations (regulatory and reportable diseases/certificates of veterinary inspection)
  - d. Drug Enforcement Agency regulations
  - e. Pharmacy regulations
  - f. Other government agencies that regulate veterinary medicine
- 2. Diseases and conditions which are more prevalent in California and the western U.S.
  - (i.e., foxtails, salmon poisoning, coccidioidomycosis)
- 3. Diseases and conditions that occur elsewhere but due to demographics or husbandry practices occur with an above average incidence in California
- 4. Diseases and conditions that have a public health concern (i.e. rabies)

Since the California State Board examination contains radiation safety questions, you may wish to download a copy of the Radiation Safety Booklet at <a href="https://www.vmb.ca.gov/consumer\_issues.htm">www.vmb.ca.gov/consumer\_issues.htm</a> or by mailing your request with a check or money order of \$5.00 to the Board office. You should receive the Radiation Safety Booklet within one to two weeks of your request. There is also a source reference included in this handbook since the examination contains questions concerning regulations from other jurisdictions.

## VETERINARY MEDICAL BOARD Candidate List of Reference Sources for CSB

### **May 2006**

#### GENERAL REFERENCE

1. California Veterinary Medicine Practice Act. (2005 Ed.) LexisNexis Group.

#### GENERAL MEDICAL REFERENCE

- 2. <u>Dorland's Illustrated Medical Dictionary.</u> (28<sup>th</sup> Ed.). (1994). Philadelphia, PA: W.B. Saunders Company.
- 3. Radostits, Otto. et al (2000). <u>Veterinary Clinical Examination and Diagnosis</u>. London, UK: Saunders.
- 4. Radiation Safety Guide (1998). Veterinary Medical Board.

#### DRUGS & PHARMACOLOGY

- 5. <u>Physicians Desk Reference</u>. (59<sup>th</sup> Ed.). (2005). Montvale, NJ: Medical Economics Company, Inc.
- 6. Plumb, Donald C. (2005) <u>Veterinary Drug Handbook.</u> (5<sup>th</sup> Ed.). Stockholm, WI: Blackwell Publishing.

#### AVIAN / EXOTIC MEDICINE & SURGERY

- 7. Ritchie, Branson W., Harrison, Greg J., and Harrison, Linda R., (1994). **Avian Medicine: Principles and Application**. Lake Worth, FL: Wingers Publishing.
- 8. Quesenberry, Katherine E., and Carpenter, James W., (2004). Ferrets, Rabbits, and Rodents Clinical Medicine and Surgery (2<sup>nd</sup> Ed.). St. Louis, MO: Saunders.

#### **EQUINE MEDICINE & SURGERY**

- 9. Stashak, Ted S. (2002). <u>Adams' Lameness in Horses.</u> (5<sup>th</sup> Ed.). Philadelphia, PA: Lippincott, Williams & Wilkins.
- 10. Dik, K.J., and Gunsser, I. (1989). <u>Atlas of Diagnostic Radiology of the Horse</u>. Philadelphia, PA: W.B. Saunders Company.
- 11. Robinson, N. Edward (2003) <u>Current Therapy in Equine Medicine 5.</u> St. Louis, MO: Saunders.
- 12. Brown, Christopher M., and Bertone, Joseph J. (2002) <u>The 5-Minute Veterinary</u> Consult Equine. Philadelphia, PA: Lippincott Williams & Wilkins.
- 13. Butler, Janet A. et al. (1993). <u>Clinical Radiology of the Horse</u>. Oxford, UK: Blackwell Scientific Publications.
- 14. Reed, Stephen M. et al. (2004). **Equine Internal Medicine** (2<sup>nd</sup> Ed.). St. Louis, MO: Saunders.
- 15. Ross, Mike W.; Dyson, Sue J. (2003). <u>Diagnosis and Management of Lameness</u> in the Horse. Philadelphia, PA: Saunders

#### LARGE ANIMAL MEDICINE & SURGERY

- 16. Youngquist, Robert S., (1997). <u>Current Therapy in Large Animal Theriogenology</u> Philadelphia, PA: Saunders.
- 17. Howard, Jimmy L. & Smith, Robert A. (1999). <u>Current Veterinary Therapy</u> <u>Food Animal Practice 4</u>. Philadelphia, PA: Saunders.
- 18. Smith, Bradford P. (2002). <u>Large Animal Internal Medicine.</u> (3<sup>rd</sup> Ed.). St. Louis, MO: Mosby.
- 19. Pugh, D.G., (2002). Sheep & Goat Medicine. Philadelphia, PA: Saunders.

#### MULTIPLE SPECIES (LARGE & SMALL) MEDICINE & SURGERY

20. Kahn, Cynthia (ed.) (2005) <u>The Merck Veterinary Manual</u>. (9<sup>th</sup> ed.) Philadelphia, PA: National Publishing, Inc.

#### SMALL ANIMAL MEDICINE & SURGERY

- 21. Feldman, Edward C., and Nelson, Richard W., (2004). <u>Canine and Feline</u> <u>Endocrinology and Reproduction</u> (3<sup>rd</sup> Ed.). St. Louis, MO: Saunders.
- 22. Kirk, R.W. (Ed.) (1995). <u>Current Veterinary Therapy XII</u>. Philadelphia, PA: W.B. Saunders.
- 23. Kirk, R.W. (Ed.) (2000). <u>Current Veterinary Therapy XIII</u>. Philadelphia, PA: W.B. Saunders Company.
- 24. Morgan, Rhea V., Bright, Ronald M., and Swartout, Margaret S. (2003). <u>Handbook of Small Animal Practice</u> (4<sup>th</sup> Ed.). Philadelphia, PA: Saunders.
- 25. Nelson, Richard W., and Couto, C. Guillermo, (2005). <u>Manual of Small Animal Internal Medicine</u> (2<sup>nd</sup> Ed.). St. Louis, MO: Elsevier Mosby.
- Chrisman, Cheryl, Mariani, Christopher, Platt, Simon, and Clemmons, Roger, (2003). <u>Neurology for the Small Animal Practitioner</u>. Jackson, WY: Teton NewMedia.
- 27. Martin, Charles L. (2005). **Ophthalmic Disease in Veterinary Medicine.** London, U.K., Manson Publishing Ltd.
- 28. Birchard, Stephen, and Sherding, Robert, (2000). **Saunders Manual of Small Animal Practice.** (2<sup>nd</sup> Ed.). Philadelphia, PA: W.B. Saunders Company.
- 29. Willard, Michael Dr., and Tvedten, Harold (2004). **Small Animal Clinical Diagnosis by Laboratory Methods** (4<sup>th</sup> Ed.). St. Louis, MO: Saunders.
- 30. Slatter, Douglas (ed.). (1993). <u>**Textbook of Small Animal Surgery**</u> (2<sup>nd</sup> Ed.). Philadelphia, PA: W.B. Saunders Company.
- 31. Tilley, Larry P., and Smith, Jr. Francis W.K. (2004) <u>The 5 Minute Veterinary</u> Consult Canine and Feline (3<sup>rd</sup> Ed.) Baltimore, MD: Williams & Wilkins.

doc: workshop/VMBCandidateRefList2006

#### REQUEST FOR ACCOMMODATION OF DISABILITIES

#### TO BE COMPLETED BY THE CANDIDATE

If you have a disability for which you wish to request an accommodation for an examination administered by the Veterinary Medical Board or the Registered Veterinary Technician Committee, please provide the following information. Return this form as well as all other required documentation to the board with your application. You may attach additional pages if necessary. Accommodations will not be provided at the examination site unless this form and all other documentation is received at the time of submission of the application. This form and all supporting documentation will become a part of your examination record, but will be purged from your file when you have passed the examination.

1. Your name, address and telephone as stated on your application.
2. Describe your type of disability (e.g., physical, mental, learning) and how this disability substantially limits one or more of your major life activities.
3. What is the nature and extent of the disability (e.g., hearing impaired, diabetic, dyslexic, etc.)?
4. Describe the accommodation requested, given the format of the examination(s).
5. Describe any past accommodations you have received for this disability. For what purpose or examination were the accommodations given to you and who evaluated you for purposes of receiving the accommodation?
6. Provide the board written verification of disability from a licensed professional (available upon request) supporting the accommodations you are requesting for your disability. The board will not pay any costs you may incur in obtaining the required documentation. However, it will pay for any accommodations that are made for you. Information concerning your disability is considered to be confidential and will not be divulged.

Upon receipt of the required documentation, you will be notified in writing of the accommodation that will be made for you.

If you have any questions, you may contact the board at (916) 263-2611 and ask to speak with the Special Accommodations Coordinator in the Examination Unit.

### FINGERPRINTING REQUIREMENTS

All candidates for licensure or registration must be fingerprinted by Live Scan, which can only be completed at a California Live Scan location. Although the Live Scan is not required for approval to take an examination or obtain intern/resident or reciprocity temporary license, the results from Live Scan must be received by the Veterinary Medical Board (VMB) prior to approval for regular licensure/registration.

You <u>must</u> obtain a "Request for Live Scan Service" form from the VMB or from the VMB website. For information on Live Scan fingerprinting locations and fees, please visit the Attorney General's Office website at: <a href="http://caag.state.ca.us/app/livescan.htm">http://caag.state.ca.us/app/livescan.htm</a>.

Live Scan service fee (rolling fee).				
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• • • • • • • • • • • • • • • • • • •	ng "Request for LIVE SCAN Service" form form (not required below) in the following numbered sections:			
(1) Complete this entire section.  Name of Applicant: Enter applicant's full nar AKA's: Names (if any) the applicant has used DOB: Date of Birth Sex: Gender (MALE OR HT: Height WT: Weight EYE Color: Eye Color HAIR Color: Hair Col POB: Place of Birth SOC: Social Security Number	d. CDL: California Driver's License Number FEMALE) Misc. No. Enter other identifying numbers (e.g. Other State Driver's License Number)			
(2) Complete this section <b>ONLY</b> if your prints Your number: <u>NA</u> If resubmission, list Original ATI No: <u>This numbers</u>	were rejected.  umber is located in section (3) of the Live Scan form			
(3) This section to be completed by the LIVE Live Scan Transaction Completed By:	SCAN operator.  Date:			
Transmitting Agency	ATI No. Agency Telephone No. (Optional)			
• • • • • • • • • • • • • • • • • • • •	y of the <b>completed</b> Request for Live Scan form from the Live must be submitted to the Veterinary Medical Board with your			
You may click on the link below for the reques 2610.	st for Live Scan form or by calling the VMB office at (916) 263-			
Questions about Live Scan should be directed	d to the VMB office at (916) 263-2610.			
CLICK HERE FOR THE F	PEOLIEST FOR LIVESCAN SERVICE FORM			

(LINK TO: http://www.vmb.ca.gov/exam/livescan.pdf)